

AAC CONTRACTING, INC.
175 HUMBOLDT STREET ROCHESTER, NY 14610
NOTIFICATION OF DEMOLITION AND RENOVATION

B6917

OPERATOR PROJECT #	POSTMARK	DATE REC'D	NOTIFICATION #
I. TYPE OF NOTIFICATION (O-ORIGINAL R-REVISED C-CANCELLED): O			
II. FACILITY INFORMATION (IDENTIFY OWNER, REMOVAL CONTRACTOR, AND OTHER OPERATOR)			
OWNER NAME: New York State Dept. of Transportation			
ADDRESS: 1140 East Union Street			
CITY: Newark	STATE: NY	ZIP: 14513	
CONTACT: Mary Ellen Papin			TEL: 585-216-4423
REMOVAL CONTRACTOR: AAC Contracting, Inc.			
ADDRESS: 175 Humboldt Street			
CITY: Rochester	STATE: NY	ZIP: 14610	
CONTACT: Kevin T. Cannan			TEL: (585) 527-8000
OTHER OPERATOR:			
ADDRESS:			
CITY:	STATE:	ZIP:	
CONTACT:			TEL:
III. TYPE OF OPERATION (D-DEMO O-ORDERED DEMO R-RENOVATION E-EMERG. RENOVATION: R			
IV. IS ASBESTOS PRESENT? (YES/NO) YES			
V. FACILITY DESCRIPTION (INCLUDE THE BUILDING NAME, NUMBER AND FLOOR OR ROOM NUMBER)			
BLDG. NAME: New York State Dept. of Transportation			
ADDRESS: 1140 East Union Street			
CITY: Newark	STATE: NY	COUNTY: Wayne	
SITE LOCATION: 1140 East Union Street			
BUILDING SIZE: 13,650	# OF FLOORS: 1	AGE IN YEARS: 61	
PRESENT USE: Maintenance Shop		PRIOR USE: Same	
VI. PROCEDURE, INCLUDING ANALYTICAL METHOD, IF APPROPRIATE, USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL:			
<p>Material was determined to contain asbestos by Bulk Sample Analysis utilizing Polarized Light Microscopy with Dispersion Staining in accordance with EPA Guidelines.</p>			
VII. APPROXIMATE AMOUNT OF ASBESTOS, INCLUDING:		NONFRIABLE ASBESTOS MATERIAL NOT TO BE REMOVED	
1. REGULATED ACM TO BE REMOVED		CAT I	
2. CATEGORY I ACM NOT REMOVED		CAT II	
3. CATEGORY II ACM NOT REMOVED			
PIPES			
SURFACE AREA	256		
VOL RACM OFF FACILITY COMPONENT			
VIII. SCHEDULED DATES ASBESTOS REMOVAL (MMDDYY)		START: 09/21/16	COMP: 09/22/16
IX. SCHEDULED DATES DEMO RENOVATION (MMDDYY)		START:	COMP:

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X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED:

Abatement to be performed as per NYS ICR 56 regulations

XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION AND RENOVATION SITE:

Regulated Work area, personal and waste decons, PPE, air monitoring.

XII. WASTE TRANSPORTER #1

NAME: Waste Management

ADDRESS: 1661 Mount Read Boulevard

CITY: Rochester

STATE: NY

ZIP: 14624

CONTACT PERSON:

TELEPHONE: 585-254-6590

WASTE TRANSPORTER #2

NAME:

ADDRESS:

CITY:

STATE:

ZIP:

CONTACT PERSON:

TELEPHONE:

XIII. WASTE DISPOSAL SITE

NAME: High Acres Landfill

LOCATION: 425 Perinton Parkway

CITY: Perinton

STATE: NY

ZIP: 14450

TELEPHONE: 585-223-6231

XIV. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEASE IDENTIFY THE AGENCY BELOW:

NAME:

TITLE:

AUTHORITY:

DATE OF ORDER (MM/DD/YY):

DATE TO BEGIN (MM/DD/YY):

XV. FOR EMERGENCY RENOVATIONS

DATE AND HOUR OF EMERGENCY (MM/DD/YY):

HR:

DESCRIPTION OF THE SUDDEN, UNEXPECTED EVENT:

EXPLANATION OF HOW THE EVENT CAUSED UNSAFE CONDITIONS OR WOULD CAUSE EQUIPMENT DAMAGE OR AN UNREASONABLE FINANCIAL BURDEN:

XVI. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO POWDER.

Work to be stopped immediately. Area to be cleaned utilizing wet wiping and/or HEPA vacuuming. Asbestos materials to be abated in accordance with applicable regulations.

XVII. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF THIS REGULATION (40 CFR, PART 61, SUBPART M) WILL BE ON-SITE DURING THE DEMOLITION OR RENOVATION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURING NORMAL BUSINESS HOURS. (REQUIRED 1 YEAR AFTER PROMULGATION)

Craig Everhart

DATE: 9/6/2016

XVIII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT

Craig Everhart

DATE: 9/6/2016